

## District of Columbia



Management Name:

## ATTACHMENT FOR REPORTING ALL DEFICIENCIES

GENERAL NOTES:

Building Address: \_\_\_\_\_

 (a) See ASME A17.2 for detailed inspection information on each item number.
(b) OK = meets requirements; NG = insert number to identify comment Checklist; NA = not applicable.

		Address:	
		City, Zip Code:	
ID Number:		D.C. File Number	
☐ Passenger	Rated Load	☐ Routine inspection a	and test
☐ Freight Class Rated Speed		☐ Periodic Inspection and test; Five year test due	
		☐ Acceptance Inspect	ion and Test Code Edition
Inspected by: (1	Printed)	☐ Re-inspected	
Signature: Date:		QEI number: Certifying Organization	
	mpany		
All info	ormation shall be typed and signed	l by inspector	
	e this attachment and identify all i		on the inspection checklist.
-		of the Code in Violation	
	·		
Record Edi	tion of Code that the elevator is re-	quired to meet:	Code Data Plate
Item	Description of the	violation	Edition of Code and Rule in
Number	Description of the	violation	violation